

APPROVED	O.G. FIG.	
BY	CLASS	SUBCLASS
DRAFTSMAN		

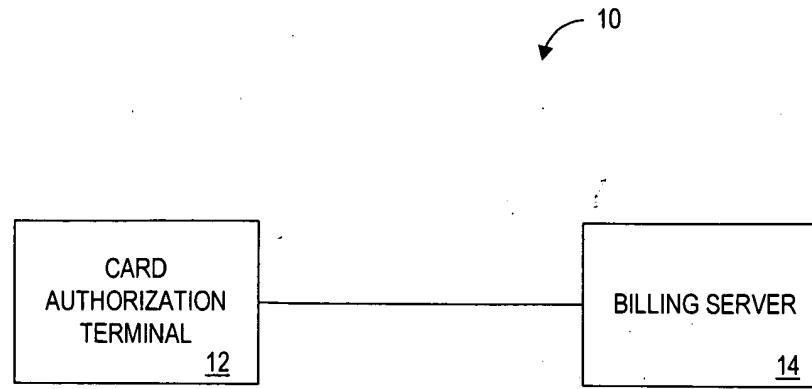


FIG. 1

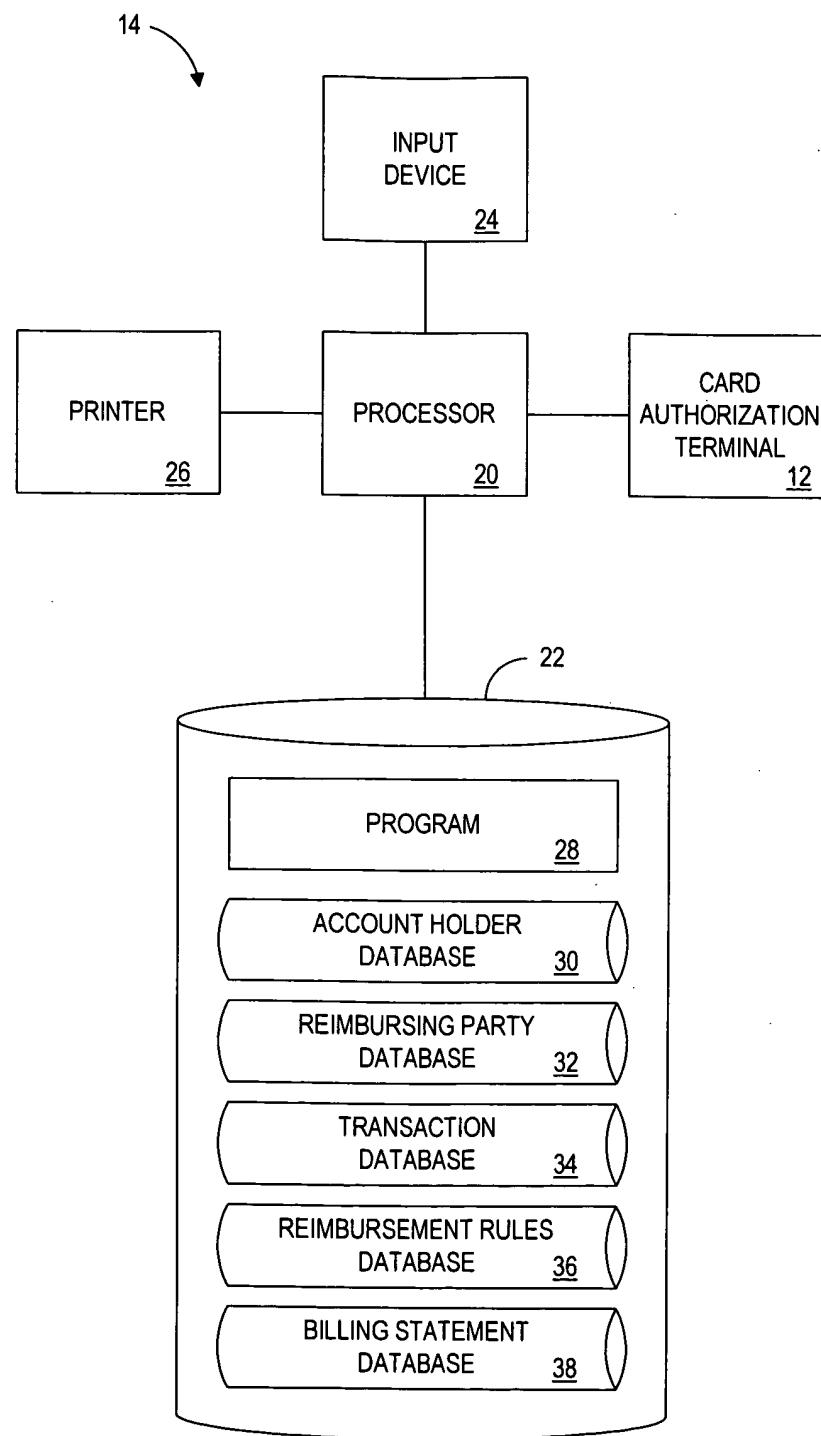


FIG. 2

RECEIVED	O.G. FIG.	
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ACCOUNT IDENTIFIER	ACCOUNT HOLDER NAME	ACCOUNT HOLDER BILLING ADDRESS	MAXIMUM BALANCE	AVAILABLE BALANCE
<u>64</u>	<u>66</u>	<u>68</u>	<u>70</u>	<u>72</u>
1111-1111-1111-1111	BILL JONES	123 MAIN ST. CITY, STATE	\$5,000	\$4,975
1111-1122-2222-2222	SUE JOHNSON	87 PLACE LANE TOWN, USA	\$7,000	\$3,000
1111-9824-2345-6523	TIM SMITH	18 PLACE RD. TOWN, USA	\$10,000	\$7,500
1111-4397-9371-9571	MARY PARKER	21 STREET TOWN, USA	\$1,000	\$200
1111-9471-3856-1936	SALLY MARTIN	98 AVENUE TOWN, USA	\$4,000	\$1,500
1111-0385-2987-0973	MIKE McDONALD	55 STREET PLACE, USA	\$1,500	\$250

FIG. 3

BY	O.G. FIG.	
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REIMBURSING PARTY IDENTIFIER	REIMBURSING PARTY DESCRIPTOR	TOTAL AMOUNT OF PAYMENT DUE
<u>90</u>	<u>92</u>	<u>94</u>
R 729	CORPORATION X	\$180.00
R 730	INSURER Z	\$3,482.00
R 731	GRANDMA JONES	\$15.00
R 732	STOP & SHOP	\$0.00

82 84 86 88

FIG. 4

OWNER	O.G. FIG.	
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ACCOUNT IDENTIFIER 1111-1111-1111-1111

TRANSACTION IDENTIFIER	MERCHANT IDENTIFIER	POS IDENTIFIER	TRANSACTION DATE	TRANSACTION DESCRIPTION	TRANSACTION AMOUNT
<u>110</u>	<u>112</u>	<u>114</u>	<u>116</u>	<u>118</u>	<u>120</u>
987654	66666	AB 123	4/7/98	SIC CODE: 5182 RESTAURANT	\$125.00
123456	55555	CD 234	4/7/98	SIC CODE: MEDICAL CARE PROVIDER	\$150.00
123795	99999	XY 327	4/7/98	MERCHANT CODE: FOOTLOCKER	\$100.00

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FIG. 5

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ACCOUNT IDENTIFIER 1111-1111-1111-1111

REIMBURSING PARTY IDENTIFIER	REIMBURSEMENT CONDITION	REIMBURSEMENT AMOUNT	BILLING DESTINATION	TIME TO REIMBURSE	ACCOUNT ALIAS	ALLOWED FREQUENCY OF TRANSACTIONS
<u>142</u>	<u>144</u>	<u>146</u>	<u>148</u>	<u>150</u>	<u>152</u>	<u>154</u>
R 729	MERCHANT CODE: JOE'S OFFICE SUPPLY	50% OF TRANSACTION UP TO \$80	OFFICEMANAGER@ CORPX.COM	60 DAYS	1111-1111-WJONES	ONE TIME ONLY
R 729	SIC CODE: RESTAURANT	TRANSACTION AMOUNT UP TO \$100	PO BOX 1 CHICAGO, ILLINOIS	30 DAYS	1111-1111-WJONES	TWICE / WEEK
R 730	SIC CODE: MEDICAL CARE PROVIDER	95% OF TRANSACTION AMOUNT	1 CORPORATE PARK LOS ANGELES, CA	30 DAYS	1234567890	NO LIMIT
R 731	ALWAYS	POS CODE 234 (\$10)	1 MAIN ST. BOSTON, MA	30 DAYS	BILLYJONES82	ONE TIME PER CODE

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FIG. 6

APPROVED	O.G. FIG.	
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TRANSACTION IDENTIFIER	TRANSACTION AMOUNT	CHARGE AMOUNT	PARTY TO CHARGE	BILLING DESTINATION	PAYMENT STATUS
170	172	174	176	178	180
123456	\$150.00	\$142.50	R 730	1 CORPORATE PARK LOS ANGELES, CA	BILLED 4/29/98 PAID 5/13/98
123456	\$150.00	\$7.50	1111-1111-1111-1111	123 MAIN ST. CITY, STATE	BILLED 4/30/98 NOT PAID

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FIG. 7

SEARCHED	O.G. FIG.
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CLASS	SUBCLASS

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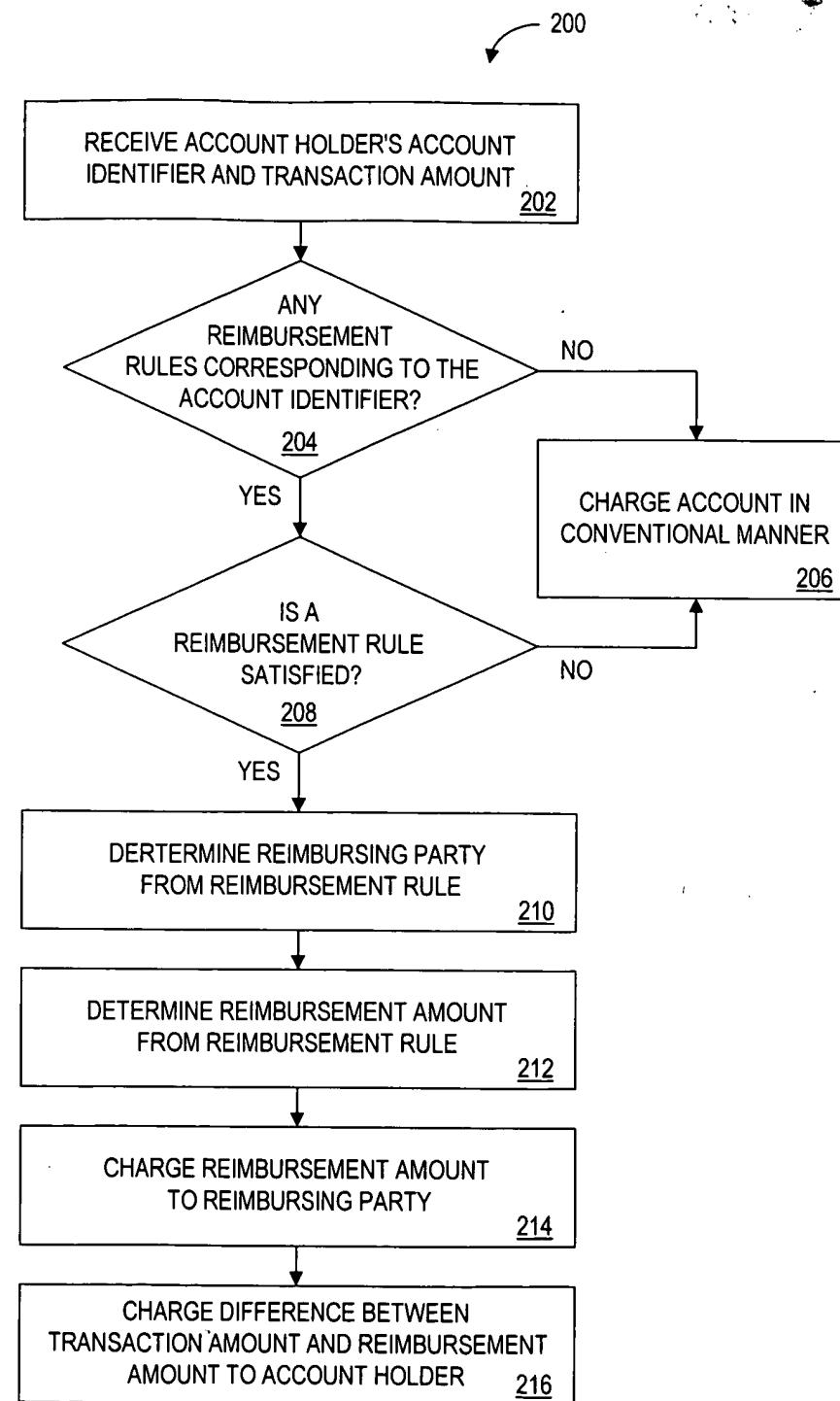


FIG. 8

SEARCHED
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BY
CLASS
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O.G. FIG.
SUBCLASS

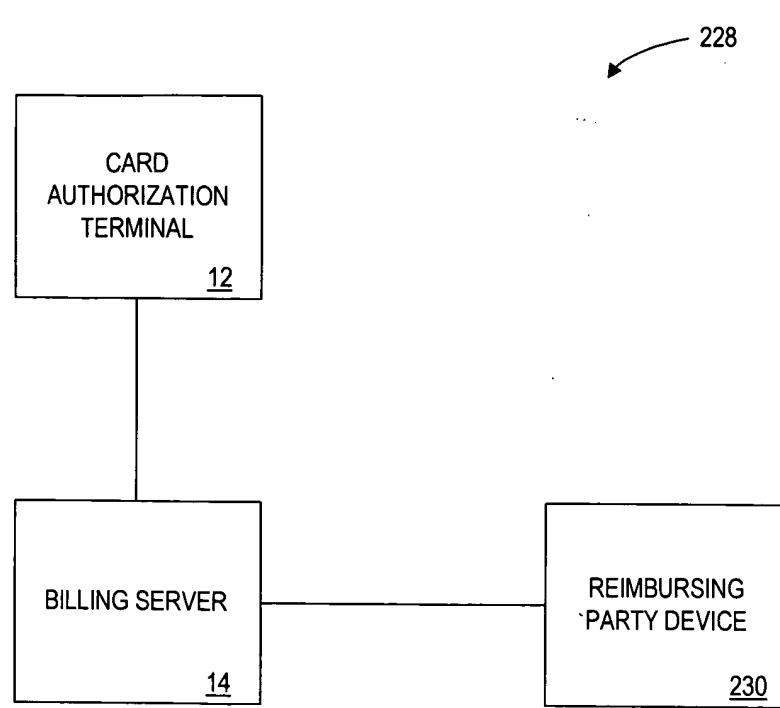


FIG. 9

REMOVED BY RAFTSMAN	O.G. FIG.
CLASS	SUBCLASS

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ACCOUNT IDENTIFIER 1111-1111-1111-1111						242
REIMBURSING PARTY IDENTIFIER	REIMBURSEMENT CONDITION	COMMUNICATION ADDRESS FOR APPROVAL REQUEST	REIMBURSEMENT AMOUNT	BILLING DESTINATION	TIME TO REIMBURSE	ACCOUNT ALIAS
<u>252</u>	<u>254</u>	<u>256</u>	<u>258</u>	<u>260</u>	<u>262</u>	<u>264</u>
R 729	MERCHANT CODE: JOE'S OFFICE SUPPLY	FINANCE@ CORPX.COM	50% OF TRANSACTION UP TO \$80	OFFICEMANAGER@ CORPX.COM	60 DAYS	1111-1111- WJONES
R 729	SIC CODE: RESTAURANT	203-555-1234	TRANSACTION AMOUNT UP TO \$100	PO BOX 1 CHICAGO, ILLINOIS	30 DAYS	1111-1111- WJONES
R 730	SIC CODE: MEDICAL CARE PROVIDER	212-555-8888	95% OF TRANSACTION AMOUNT	1 CORPORATE PARK, LOS ANGELES, CA	30 DAYS	1234567890
R 731	ALWAYS	617-555-8765	POS CODE 234 (\$10)	1 MAIN ST. BOSTON, MA	30 DAYS	BILLYJONES82

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FIG. 10

RECEIVED	O.G. FIG.	
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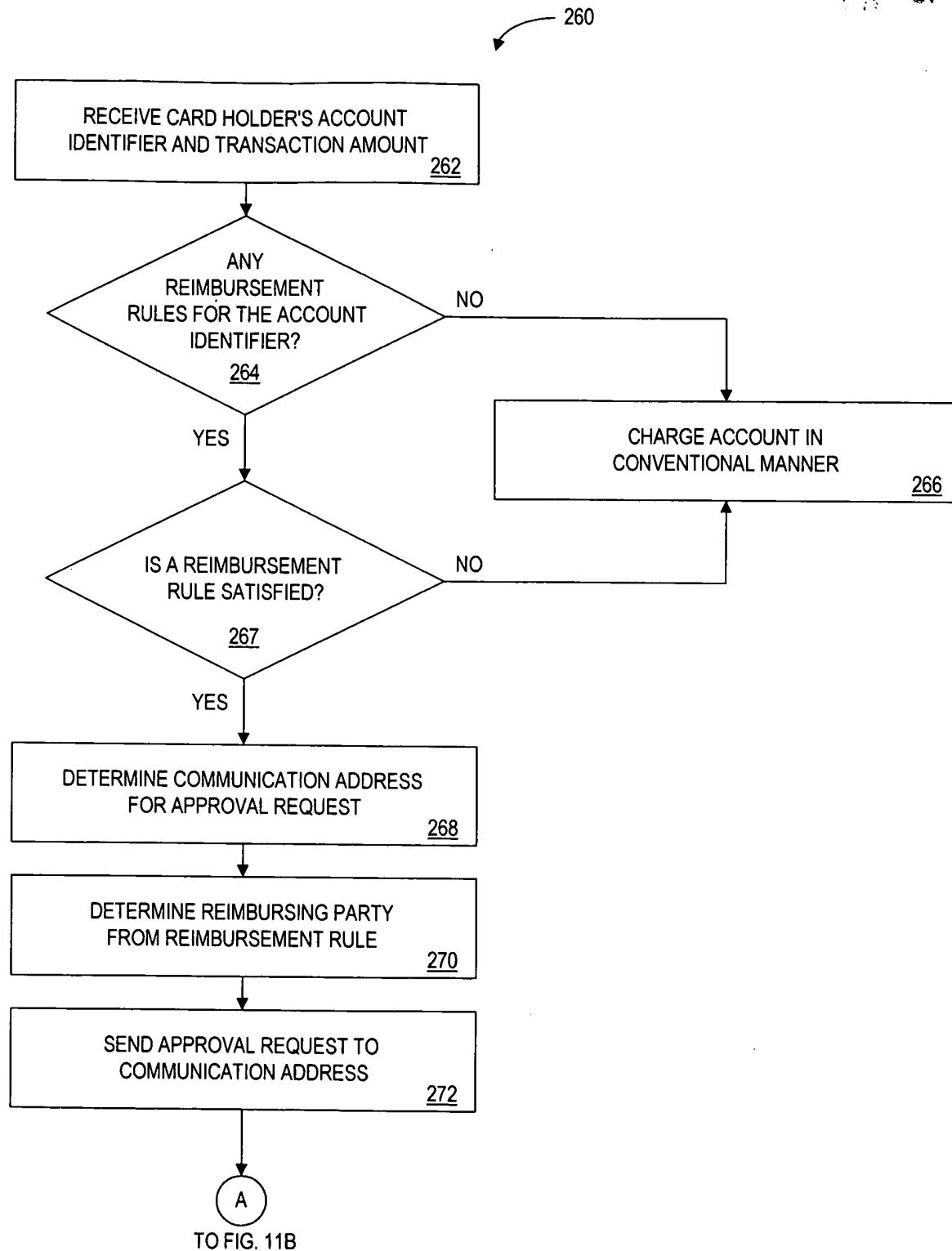


FIG. 11A

APPLIED BY CRAFTSMAN	O.G. FIG.
	CLASS SUBCLASS

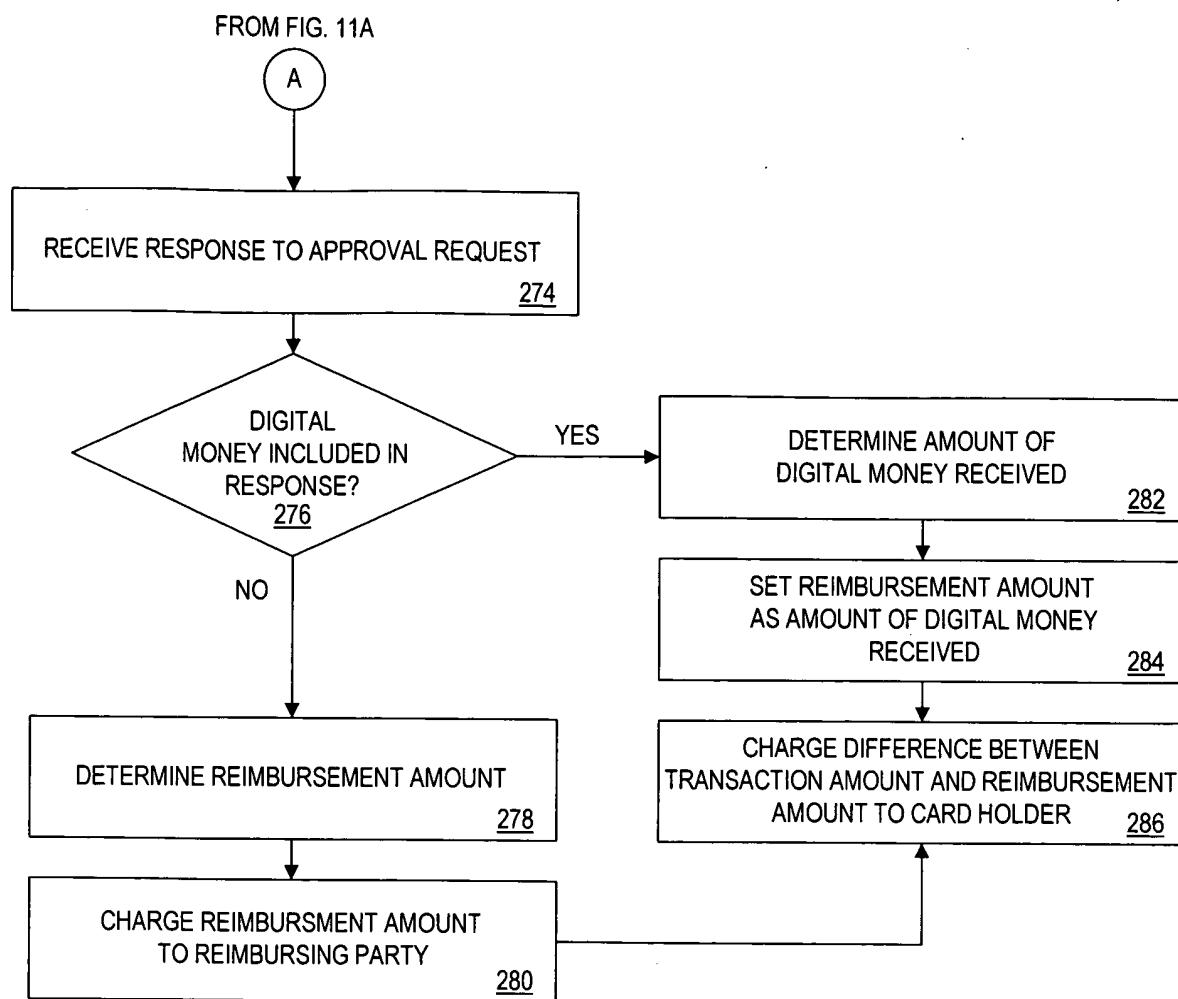


FIG. 11B

APPROVED	O.G. FIG.	
BY	CLASS	SUBCLASS
CRAFTSMAN		

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TRANSACTION IDENTIFIER	TRANSACTION AMOUNT	CHARGE AMOUNT	PARTY TO CHARGE	BILLING DESTINATION	PAYMENT STATUS
<u>170</u>	<u>172</u>	<u>174</u>	<u>176</u>	<u>178</u>	<u>180</u>
987654	\$125.00	\$100.00	R729	PO BOX 1 CHICAGO, IL	BILLED 5/1/98 NOT PAID
987654	\$125.00	\$25.00	1111-1111-1111-1111	123 MAIN ST. CITY, STATE	BILLED 5/7/98 NOT PAID

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FIG. 12

AN INVENTOR	O.G. FIG.	
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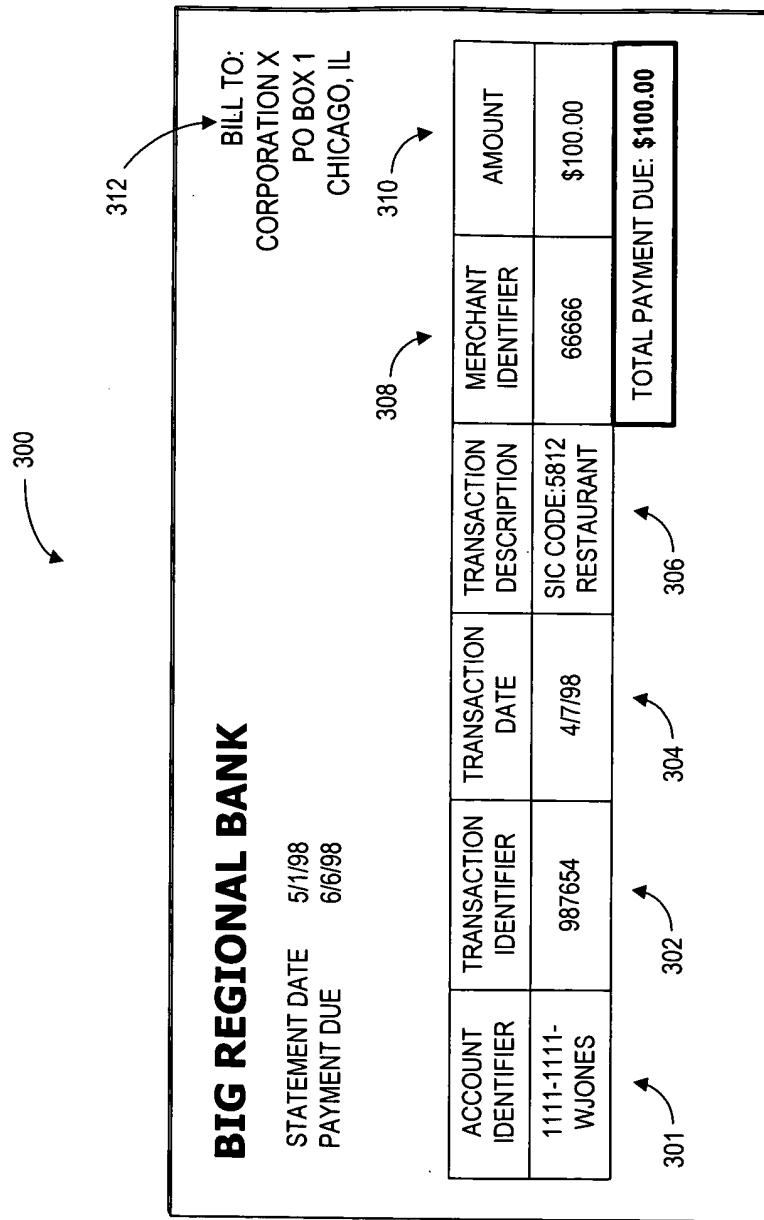


FIG. 13

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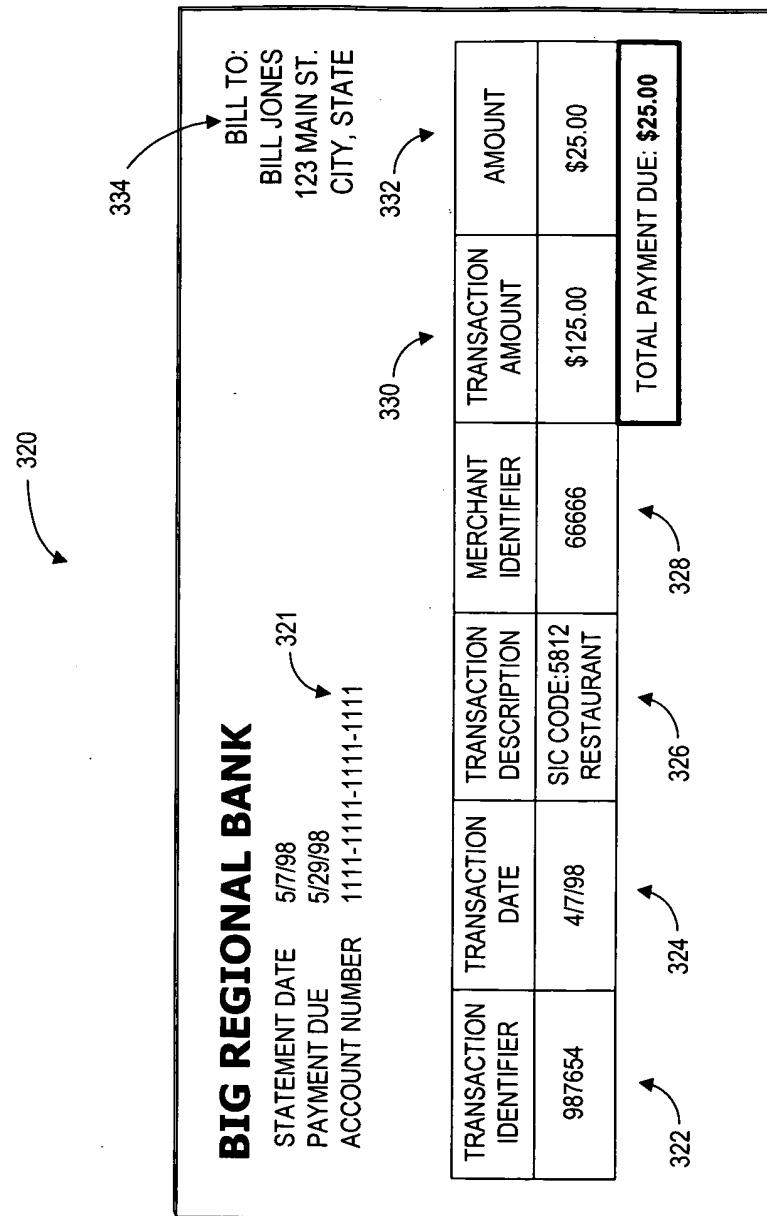


FIG. 14

BY	O.G. FIG.	
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ACCOUNT IDENTIFIER	ACCOUNT ALIAS
<u>352</u>	<u>354</u>
1111-1111-1111-1111	1111-1111-BCDE-EFGH
1111-1122-2222-2222	1111-1122-ABCD-EFGH
1111-9824-2345-6523	1111-9824-8549-ASIB
1111-4397-9371-9571	1111-4397-AGUZ-YEPT

FIG. 15

APPLICANT	O.G. FIG.	
BY	CLASS	SUBCLASS
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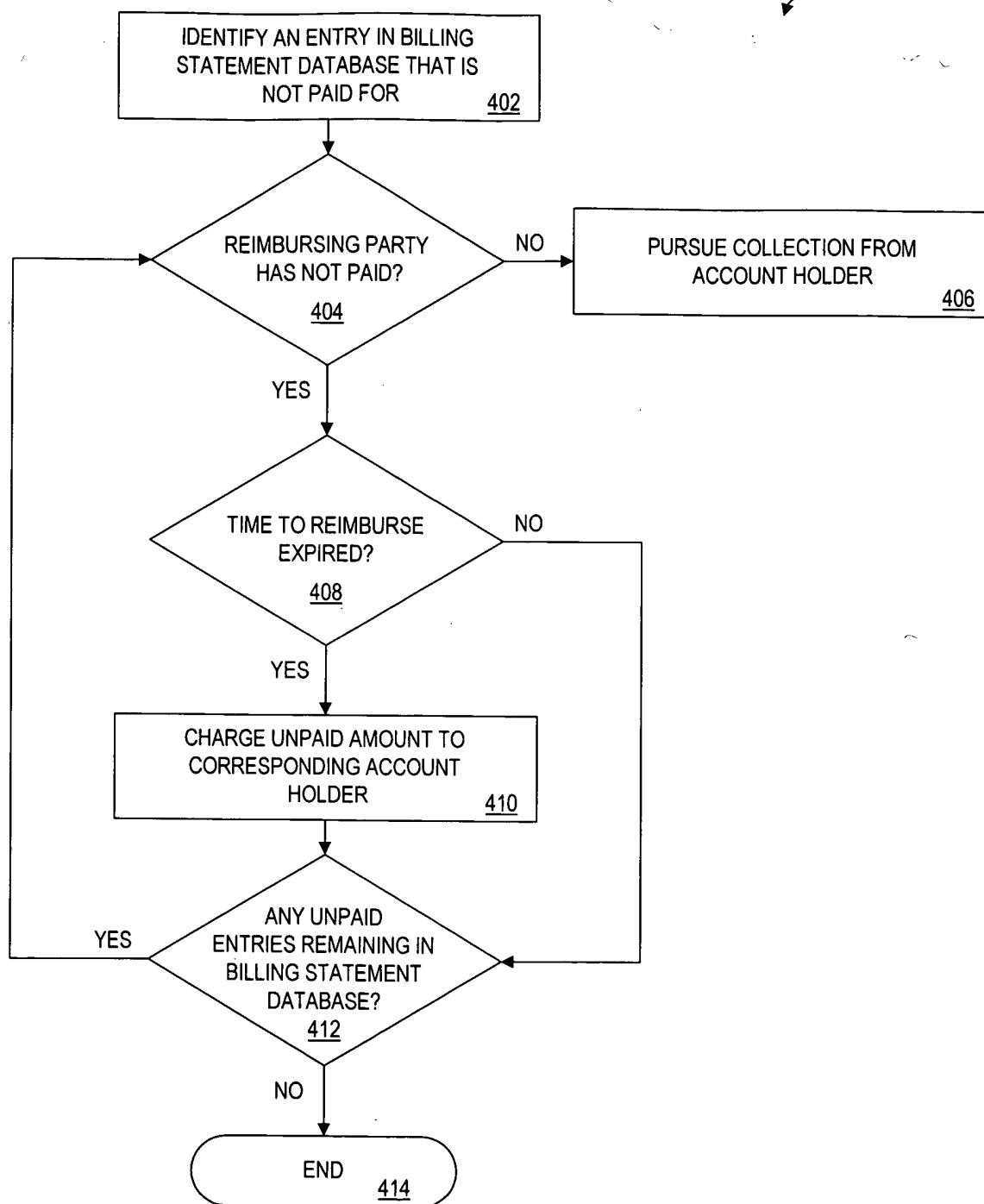


FIG. 16

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